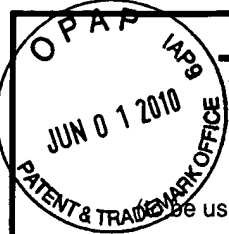

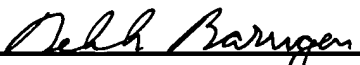


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 <h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(To be used for all correspondence after initial filing)</p>	Application Number	10/536,888	
	Filing Date	May 31, 2005	
	First Named Inventor	Thomas R. Young	
	Art Unit	1638	
Total Number of Pages in This Submission	2	Attorney Docket Number	63-000210US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> Amendment and Request for Reconsideration <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Receipt Acknowledgement Postcard <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Interview Summary <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Request for Continued Examination (RCE) <input type="checkbox"/> Change Entity Status	<input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Cited References <input type="checkbox"/> Copy of PCT Search Report <input type="checkbox"/> Copy of EP Search Report <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Copy of Filing Receipt – marked-up <input type="checkbox"/> Replacement/Supplemental Application Data Entry Form <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Fee Address Indication Form	<input type="checkbox"/> Executed Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Certificate of Assignee <input checked="" type="checkbox"/> Request For Recalculation of Patent Term Adjustment <input type="checkbox"/> Sequence Listing Statement <input type="checkbox"/> Sequence Listing Paper Form <input type="checkbox"/> Drawings <input type="checkbox"/> Letter to Official Draftsperson <input type="checkbox"/> Replacement Specification – Marked-Up <input type="checkbox"/> Replacement Specification – Clean Copy		
<b>Authorization to Charge Deposit Account</b> Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.				
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Remarks</td> <td></td> </tr> </table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Quine Intellectual Property Law Group P.C.		
Printed name	Brian E. Davy	Reg. No.	61,197
Signature			
Date	May 28, 2010		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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